



**Lifeline
Online
Postvention
Manual**

Online Postvention Manual

Overview

When someone dies by suicide that person's online social media profile often becomes a hub for friends and family to talk about the suicide and memorialize the person who died. Exposure to suicide, whether through a personal connection or through the media, is an established risk factor for suicideⁱ. There is substantial evidence that certain messages (e.g., those that glamorize the suicide) and certain information (e.g., details regarding the method of suicide used) may contribute to contagion.ⁱⁱ The comments posted on these profiles can contain unsafe messages and sometimes include expressions of suicidal ideation by friends or family of the deceased.

When implementing postvention strategies in a community or school, it is important to also consider the role of the internet and to ensure that postvention initiatives also target existing online communities. This is especially important when the deceased is between the ages of 15 and 24, as data indicates this age group is very active online.ⁱⁱⁱ As a result, those individuals who would most be affected by the suicide are possibly already connected via online social networking sites (e.g., Facebook, MySpace, etc.) and are most likely already engaging in conversation about the suicide, which is taking place and being recorded online. This affords those undertaking postvention efforts an important and efficient means of distributing information and resources, as well as of monitoring those connected to the bereaved for any indications of suicide risk.

In sum, the postvention work done in "real world" communities should be replicated online. Comprehensive strategies will assist those affected by a suicide within schools and other community settings, in addition to using social media sites to further these efforts. Responsible postvention initiatives should utilize social networking sites to 1) distribute relevant information and resources, and 2) monitor comments from individuals connected to the bereaved.

Furthermore, those overseeing these efforts should collaborate with parents and guardians to ensure that they monitor their children's use of social media and work with families of the deceased to bypass any privacy settings that would prohibit the activities outlined above.

The recommendations below detail how to safely memorialize someone who has died by suicide. These messaging guidelines can also be applied to online memorials and online messages about the deceased.

After Suicide: Recommendations for Religious Services & Other Public Memorial Observances, Suicide Prevention Resource Center, 2004.^{iv}

Prevent Imitation and Modeling

Public communication after a suicide can potentially affect the suicide risk of those receiving the communication (CDC et al., 2001). Some types of communication about the deceased and his or her actions may influence others to imitate or model the suicidal behavior. Consequently, it is important in this context not to glamorize the current state of “peace” the deceased may have found through death. Although some religious perspectives consider the afterlife to be much better than life in the physical realm, particularly when the quality of physical life is diminished by a severe or unremitting mental illness, this contrast should not be overemphasized in a public gathering. If there are others in the audience who are dealing with psychological pain or suicidal thoughts, the lure of finding peace or escape through death may add to the attractiveness of suicide. (Information about resources for treatment and support should be made available to those attending the observance.) In a similar way, one should avoid normalizing the suicide by interpreting it as a reasonable response to particularly distressful life circumstances.

Instead, make a clear distinction, and even separation, between the positive accomplishments and qualities of the deceased and his or her final act. Make the observation that although the deceased is no longer suffering or in turmoil, we would rather she or he had lived in a society that understood those who suffer from mental or behavioral health problems and supported those who seek help for those problems without a trace of stigma or prejudice. Envision how the community or society in general could function better or provide more resources (such as better access to effective treatments) to help other troubled individuals find effective life solutions. The goal of this approach is to motivate the community to improve the way it cares for, supports, and understands all its members, even those with the most pressing needs, rather than contribute to the community’s collective guilt.

IMPLEMENTATION

The following are steps that can be taken in online suicide postvention efforts.

Step 1: Find Social Media Profiles

The first step is to determine if and where the recent suicide death is being discussed online. The best way to do this is to search www.google.com and www.pipl.com using the first and last name of the individual who died by suicide and to browse the search results for social media profiles and other online discussions regarding the deceased.

If the social media profiles that appear in the search results cannot be accessed due to privacy settings or because the deceased is a minor, the next step would be to reach out to friends and family of the deceased. In many cases, parents will have access to their child's passwords and thus become the new administrators of their child's social media profile(s). Alternatively, the deceased's friends, many of whom will be connected to the deceased via one or more social networking sites, will have the ability to view and post comments on the deceased's profile page.

Step 2: Post Resources

Once the deceased's profile has been identified and accessed, the next step is to post resources in the comments section of the social media profile or on the profile itself. While each community has numerous resources to offer, it is important that the resources posted online be consistent across sites and profiles. Those managing online postvention efforts should determine beforehand the key resources to be posted. It is also recommended that national resources be provided, as well, since online social networks can extend beyond county and state borders.

The National Suicide Prevention Lifeline is a national 24-hour, toll-free suicide prevention service available to anyone in emotional distress or suicidal crisis. Comprised of more than 140 centers across the United States, the National Suicide Prevention Lifeline seamlessly routes callers to the closest crisis center based on the caller's location. By offering this resource, those heading postvention efforts are ensuring that those in need have access to a free service around the clock and across the nation, which has the capacity to provide callers with resources and referrals within their own community.

Recommended Language for Website Comments

The best way to honor (person's name) is to seek help if you or someone you know is struggling. If you're feeling lost, desperate, or alone- please call the National Suicide Prevention Lifeline: 1-800-273-TALK (8255). The call is free and confidential, and crisis workers are available 24/7 to assist you. To learn more about the Lifeline, visit www.suicidepreventionlifeline.org.

The Lifeline also recommends posting web banners or buttons, which link to the Lifeline's website: <http://www.suicidepreventionlifeline.org/Materials/WebBannersButtons.aspx>.

You may also wish to contact administrators of social networking groups or pages that honor the deceased, in the interest of distributing resources to hundreds of group members via wall posts, discussion board topics, images (such as the Lifeline logos), or other text. The following may be sent via private message or email to administrators, who on Facebook are generally listed on the left-hand side of the page:

Dear Group or Page Administrator,

Thank you for the chance to work together to help prevent suicide. The National Suicide Prevention Lifeline is so sorry to hear about the recent losses in your community. While there is nothing we can do to erase these tragedies, it is our hope that we can prevent others from experiencing a similar loss. Please have a look at the message below, which we crafted for possible use on your social networking group or page. By doing so, you will be offering help to the people that were affected by these deaths.

Suicide can best be prevented through treatment and support. You can honor (person's name) by seeking help if you or someone you know is struggling. If you are feeling lost, desperate, or alone- please call the National Suicide Prevention Lifeline: 1-800-273-TALK (8255). The call is free and confidential, and crisis workers are available 24/7 to assist you. To learn more about the Lifeline, visit www.suicidepreventionlifeline.org.

Messages posted online (e.g., on social media profiles) following a suicide are important as they could have a negative or positive effect and can help to prevent future tragedies. There is substantial evidence that certain messages (e.g., those that glamorize the suicide) and certain information (e.g., details regarding the method of suicide used) may contribute to contagion. While the messages posted online following a suicide should honor the person who died and comfort those left behind, it is important to make sure that those reading about the deceased online understand that there are a number of measures that can be taken to help prevent suicide.

About the Lifeline

The federally-funded National Suicide Prevention Lifeline-- 1-800-273-TALK (8255)-- is a network of crisis centers committed to suicide prevention that are located in communities across the country. People in emotional distress or suicidal crisis can call anytime from anywhere in the nation and speak to a trained worker who will listen to and assist callers with getting the help they need. Calls are routed to the nearest available center of the more than 140 centers that are currently participating in the network.

The Lifeline is administered by Link2Health Solutions, a wholly-owned subsidiary of the Mental Health Association of New York City and is funded through a grant from the Substance Abuse and Mental Health Services Administration, a division of the U.S. Department of Health and Human Services.

Questions

If you or another member of the community has questions about the National Suicide Prevention Lifeline, please find us online at www.suicidepreventionlifeline.org.

While it may not always be possible, with adequate staff time, those posting resources may choose to monitor comments on the deceased's profile for content indicating that friends are in suicidal crisis or emotional distress. In these instances, there are several options: alert friends, family or school staff; alert the Lifeline staff for follow-up from a crisis center (please visit the Lifeline's staff webpage for contact information: www.suicidepreventionlifeline.org/About/Staff.aspx); and/or post the following message on their profiles:

[Friend's name], if you are in suicidal crisis or emotional distress- please call the National Suicide Prevention Lifeline: 1-800-273-TALK (8255). Your call is free and confidential, and crisis workers are available 24/7. To learn more about the Lifeline, visit www.suicidepreventionlifeline.org.

Step 3: (For Schools Only) Letter to Parents from School Districts

If the deceased is a student, it is recommended that the school district distribute a letter to parents in order to 1) alert them that students may use social media and other online venues to communicate about the suicide, and 2) encourage them to monitor their child's internet use during some time following the death.

Below is a sample letter developed by the National Suicide Prevention Lifeline that has already been provided to various school districts following the suicide of a student. This letter encourages parents to ask their children to post an offer of help (e.g., the National Suicide Prevention Lifeline number, 2-800-273-TALK) on their social media profiles and provides sample language as well as some background information on the Lifeline.

Dear parents and family members of [example: Bowling Green High School],

Thank you for the chance to work together to help prevent suicide. The National Suicide Prevention Lifeline is so sorry to hear about the recent losses in your community, high school, and homes. While there is nothing we can do to erase these tragedies, it is our hope that we can prevent other families in your community from experiencing a similar loss. Please have a look at the message below, which we crafted for possible use on your child's social media profiles (e.g., MySpace, YouTube, Facebook). The Lifeline recommends working with your child to post these messages online. By doing so, you will be offering help to the people that were affected by these deaths.

Suicide can best be prevented through treatment and support. You can honor (person's name) by seeking help if you or someone you know is struggling. If you're feeling lost, desperate, or alone- please call the National Suicide Prevention Lifeline: 1-800-273-TALK. The call is free and confidential, and crisis workers are available 24/7 to assist you. To learn more about the the Lifeline, visit www.suicidepreventionlifeline.org.

Messages posted online (e.g., on social media profiles) following a suicide are important as they can have a negative or positive effect and can help to prevent future tragedies. There is substantial evidence that certain messages (e.g., those that glamorize the suicide) and certain information (e.g., details regarding the method of suicide used) may contribute to contagion. While the messages posted online following a suicide should honor the person who died and comfort those left behind, it is important to make sure that those reading about the deceased online (e.g., on MySpace, Facebook or other websites) can understand that there are a number of measures that can be taken to help prevent suicide.

The Lifeline also recommends that your child's internet use be monitored during this time. When someone dies by suicide, the social media profiles of the deceased often become hubs for conversation about the suicide. Please be aware of your child's online activities.

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LINKS & RESOURCES

Case Examples

For examples from actual social networking profiles, please visit the Lifeline's staff webpage for contact information: www.suicidepreventionlifeline.org/About/Staff.aspx. The case examples are not for distribution to the public at large. -

Social Media and Social Networking Sites

MySpace: www.myspace.com Social networking site for people 13 and older.

Facebook: www.facebook.com Social networking site for people 13 and older.

myYearbook: www.myearbook.com Social networking site for people 13 and older, Grade 9 and higher.

Twitter: www.twitter.com Micro-blogging site open to all ages.

YouTube: www.youtube.com Video-sharing site for people 13 and older.

SodaHead: www.sodahead.com Community discussion site for people 13 and older.

Bebo: www.bebo.com Social networking site for people 13 and older.

Search Engines

www.google.com General search engine.

www.pipl.com Searches social media profiles.

www.yahoo.com General search engine.

www.bing.com General search engine (formerly MSN Search and Live Search).

www.ask.com General search engine.

State Contact Information

<http://www.sprc.org/stateinformation/statecontacts/statecontacts.asp>

It is recommended that you are in contact with your state suicide prevention coordinator(s), the person(s) who are taking the lead in state suicide prevention plan development or implementation processes, for helpful resources in your local area.

Suicide Postvention Resources

After a suicide: Recommendations for religious services and other public memorial observances

<http://www.sprc.org/library/aftersuicide.pdf>

A guide to help community and faith leaders who plan memorial observances and provide support for individuals after the loss of a loved one to suicide.

Parent guidelines for crisis response

<http://www.sprc.org/library/parentguidelinesforcrisisresponse.pdf>

Describes the types of behaviors/reactions that parents can expect of their children after a crisis; reactions of parents after a crisis involving themselves or their children; what parents can do to address the reactions of their children; and when children should receive additional help in the form of professional intervention.

Managing sudden traumatic loss in the schools

http://www.psybc.com/pdfs/Loss_article.pdf

This is an excerpt from "Managing sudden traumatic loss in the schools," an article by Maureen Underwood and Kevin Dunne-Maxim. It was written for school staff to facilitate their understanding of the complexities of the grief that might be observed in school populations, which is why clinical language has been omitted.

A resource aid packet on responding to a crisis at a school

<http://smhp.psych.ucla.edu/pdfdocs/crisis/crisis.pdf>

This packet is divided into the following sections: a) school-based intervention, b) some basic concerns for effectively responding to crisis in schools, c) a few strategic guides for responding to a crisis, d) organizing and training a school-based crisis team, e) crisis response and prevention intervention outcomes, f) addressing specific areas of concern [includes suicidal crisis], and g) a few resources to responding to crisis at school.

Teacher guidelines for crisis response

<http://www.sprc.org/library/teacherguidelinesforcrisisresponse.pdf>

This manual is reprinted from “A practical guide to crisis response in our schools” (1999). It describes behavioral reactions of children ages 1 to 18 after a crisis; personal reactions by teachers; classroom strategies for teachers during a crisis; and when to refer students for individualized assessment and intervention.

Youth suicide prevention, intervention & postvention guidelines: A resource for school personnel

<http://www.maine.gov/suicide/docs/Guidelines%2010-2009--w%20discl.pdf>

The intent of this document is to a) understand the nature of youth suicide; risk and protective factors; warning signs and clues; and appropriate intervention steps; b) establish school-based protocols for suicide prevention, crisis intervention and postvention; c) build connections within communities and among regional support services; and d) educate school personnel, parents and students about effective suicide prevention and intervention.

Suicide Prevention Organizations

National Suicide Prevention Lifeline

www.suicidepreventionlifeline.org

The National Suicide Prevention Lifeline, 1-800-273-TALK (8255), is a 24-hour, toll-free, confidential suicide prevention hotline available to anyone in suicidal crisis or emotional distress. By dialing 1-800-273-TALK, the caller is routed to the nearest crisis center in our national network of more than 140 crisis centers. The Lifeline’s national network of local crisis centers provide crisis counseling and mental health referrals day and night.

Suicide Prevention Resource Center

www.sprc.org

SPRC promotes the implementation of the National Strategy for Suicide Prevention and enhances the nation’s mental health infrastructure by providing states, government agencies, private organizations, colleges and universities, and suicide survivor and mental health consumer groups with access to the science and experience that can support their efforts to develop programs, implement interventions, and promote policies to prevent suicide.

American Association of Suicidology

www.suicidology.org

AAS promotes research, public awareness programs, public education, and training for professionals and volunteers. In addition, AAS serves as a national clearinghouse for information on suicide.

American Foundation for Suicide Prevention

www.afsp.org

AFSP is a leading national not-for-profit organization exclusively dedicated to understanding and preventing suicide through research, education, and advocacy and to reaching out to people with mental disorders and those impacted by suicide.

SPAN USA

www.spanusa.org

SPAN USA serves as the public policy and advocacy division of the American Foundation for Suicide Prevention (AFSP). SPAN USA leverages grassroots support to advance public policies that help prevent suicide. The organization was created to raise awareness, build political will, and call for action with regard to creating, advancing, implementing, and evaluating a national strategy to address suicide in our nation.

Active Minds

www.activeminds.org

By developing and supporting chapters of college student-run mental health awareness, education, and advocacy group on campuses, Active Minds works to increase students' awareness of mental health issues, provide information and resources regarding mental health and mental illness, encourage students to seek help as soon as it is needed, and serve as liaison between students and the mental health community.

Jed Foundation

www.jedfoundation.org

www.thetrevorproject.com

The Jed Foundation works nationally to reduce the rate of suicide and the prevalence of emotional distress among college and university students. To achieve this end, the organization collaborates with the public and leaders in higher education, mental health, and research to produce and advance initiatives to decrease stigma and increase awareness and understanding of the signs of suicide and emotional disorders.

ⁱU.S. Public Health Service. (2001). National Strategy for Suicide Prevention: Goals and Objectives for Action. Washington, D.C.: Department of Health and Human Services.

ⁱⁱSuicide Prevention Resource Center. (2006). Safe and Effective Messaging for Suicide Prevention. Newton, MA: Education Development Center, Inc.

ⁱⁱⁱPew Internet & American Life Project. (2005). Teens and Technology: Youth are leading the transition to a fully wired and mobile nation. Washington, DC.

^{iv}Suicide Prevention Resource Center. (2004). After a suicide: Recommendations for religious services and other public memorial observances. Newton, MA: Education Development Center, Inc.